DISCLOSURE

REPORT

02/08

17123684862 File with: lows Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A FOR INSTRUCTIONS, SEE BACK OF FORM Des Moines, Iowa 50319 2009 MAY 29 AM 8: 25 Fax: 515-281-4073 DISCLOSURE SUMMARY PAGE COMMITTEE NAME (Must be same as on Statement of Organization) FORM DR-2 IMPORTANT: Indicate by # type of committee you are reporting for:

(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party

(4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (10)School Board or Other Packet Subdivision PAC (10)School Board Other Packet Subdivision PAC (10)Sc (Rev. 12/2005) For Office Use Only 11) Local Ballot Issue CANDIDATE COMMITTEES ONLY: n peggaل Candidate Name Political Party (if applicable) District (if Senate or House) Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to lowe Code section 688,32A(7) the candidate, for a candidate's committee and the chairperson, for any other type of committee, is the individual responsible for filling timely and accurate reports.

712 - 3 48-2549 TELEPHONE ! AM FILING A REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR.

Indicate by # CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the lest reporting period or must be zero if this is first report filed.)	2662.59
ADD TOTAL MONEY TAKEN IN THIS PERIOD	520.
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	500, -
Schedule F: Loans Received total (Attach Schedule F)	500. —
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	- 6 -
(Schedule H applies to Candidates' Committees Only) SUB-TOTAL	3682,59
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	3
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	3500.72
CASH ON HAND at the end of this reporting period (if final report balance must be zero)	181.87
TUNPAID BILLS (From Schedule D - Attach Schedule D) 5/8 902,55 s	-0-
	-0-
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) 5 5 500.00 \$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F) 5 5 500.00 \$	
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES X NO
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) 5	-0-

For instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

committee NAME (Must be same as on Statement of Organization)

6 Friedrichsen For Iowa

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
5/15/08	ID# CK#	Margaret Borgen 2504 Forest Dr. Desmoines Ia 503/2		\$ 100	INCOME
5/240/08	CK#	Carolec Franzkowiak 6561 19047 Scheller, In 51053	_	250	
26/08	ID# CK#	Drane Green 3906 Valdez Dr. Desmoines In 50310	<u> </u>	50,	<
29/08	ID# CK# —	Cliff Friedrichsen Holstein Ia 51025	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	100,	\
29/08	ID#	Connie Luguigson Holstein Ia		20	, ,
·	ID#				
ŭ	ID# CK#				
	1D# CK#				
	ID# CK#				
	ID# CK#				- ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

SUB-TOTAL

TOTAL (if last page of this schedule)

540 520 540 520

Page ____ of ___

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by merriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

	SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
_		CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Fri	edrich	sen For Iow	<u>a_</u>	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/1/08	ID# CK# 10 4	Post Office Holstein Ia 51025	stamps	s/350.
5/8/08	ID# CK# /05	Channel 18 Denison, Iowa	Ads	200
5/18/08	ID# CK# 106	Ida, Co. Courien Ida Grove Inspes	Ads	216.03
5/8/08	ID# CK# /07	Denison Bulletin Denison, Iowa	Ads	405. —
125/08	ID# CK#/08	Sioux Valley News	Ads	150
5/25/ 108	ID# CK#/09	Mapleton Press	Ads	217,50
⁵ / _{28/}	ID# CK# //O	this Printing	Postcards	393.99
128/08	CK# ///	KDSN Radio	Ads	506.25

SUB-TOTAL

\$3500.71

TOTAL (if last page of this schedule)

3500,72

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventored on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount; purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(t).)

Page ____ of ____

17123584862

FOR INSTRUCTIONS, SEE BACK OF FORM SCHEDULE COMMITTEE NAME(Must be same as on Statement of Organization) LOANS (Rev. 02/08) RECEIVED & REPAID NOTE: This schedule reports money loaned to the committee which is deposited in the committee account. CHECK THIS BOX IF **AMENDING FORM** TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 590 a PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
29/68	DonCfried richsen Holstein, In 7025	Same.	500,-

TOTAL (PART I)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E .. In-kind Contributions.)

CATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE" (If Applicable)	AMOUNT REPAID
			\$
			-0-
	•		

TOTAL CASH REPAYMENTS (PART II)

From Schedule E -- TOTAL LOANS FORGIVEN

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

3

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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Schedule Page 1	
SCHEDULE (Rev. 07/03)	MONESARY EXPENDENTURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)		
DATE ID NUMBER (if applicable) (MM/DD/YR) CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER CANDIDATE ID NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE CHECK NUMBER	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
OD/ Personal Monona County Audito	andidate Don C	Friedrichsen
OS CK# 4516 Monona, Zowa	Republican Votenlist	\$ 15. —
103/ Personal Ida County Auditon	Republican	
08 CK# 4509 Ida Grave. To	Voter List	2,40
CE Personal Crawford County Audito	a Republican Voter dist	17.14
03/ personal Woodbury County Auditor 06/08 CK# 4538 Sioux City, Ia 5/10/	r Republican Voter Labels	35, —
03/05 D# personal Staples, Sioux City, I. 10/08 CK# 4543 (Check includes other expenses for office)		hamat 162.54
109 D# Personal Post Office CK# 4764 Holstein, I a S1025	postage for mailings	351.78
107/08 CK# 4765 Holstein, In 51025	Use of Postage Permit	100. —
08/ OB CK# 4754 Correctionville Bidg Correctionville Bidg Correctionville, Installe	(Check includes other	110, -
- Total of 26.55 shown has lown or	SUB-TOTAL STOTAL (if last page of this schedule)	726,55

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount; purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Schedule B Page 20/2

FOR INSTRUCTIONS, SEE BACK OF FORM

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SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHEC AME	CK THIS BOX IF NDING FORM

	COMMIT	TEE NAME (Must	pe same as on Statement of Organization)		
	F	riedrick	sen For Iowa	a ,	
	DATE EXPENDE (MM/DD/YF	CANDIDATE ID NUMBER (if applicable)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	94/11/08	ID# quar Personal CK# 4762	Republican Party of Iowa AB Debt owed to Co	Candidate andidate School	\$ 20 - 30
	17/00	ID# CK# 100	Post office Holstein, In Sins	mailings Pastage	876.96 and
The state of the s	1/19/08	CK# / C /	Full House Signs 65/5W. Perstrim Rd. Stickney, In. 60402	yard signs	632.50 Jun
	23/08	CK# /02	Thies Printing P.O. Box 249 Ida Grove In 51445	Campaign Brochures	873-79
0	198	CK# / 0 3	Master Card	mailing habets	7978
	11/08	CK# S/2		Drive to Candidate School West Des Moines	156 5ch
	5 .	CK#	Schedule B	Expenditures tobar	246241
		CK#	Schedule b-1	Debts-total	902,55
	Total	0 \$ 176	- is shown as loan o	SUB-TOTAL (if last page of this schedule)	\$2638.91 \$384.96

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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